STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE OF TENNESSEE

METHODS OF REIMBURSING FOR RESERVED BEDS IN NURSING FACILITIES AND INTERMEDIATE CARE FACILITIES FOR THE MENTALLY RETARDED

- a. Medicaid does not reimburse for reserving a nursing facility bed on behalf of a nursing facility resident receiving Level II Care.
- b. Reimbursement for reserving a bed on behalf of a nursing facility resident receiving Level I Care is as follows:
 - (1) For days not to exceed 15 days per occasion while the resident is hospitalized and the following conditions are met:
 - (a) The resident intends to return to the nursing facility.
 - (b) The hospital provides a discharge plan for the resident.
 - (c) At least 85% of all other beds in the nursing facility are occupied at the time of the hospital admission.
 - (d) Each period of hospitalization must be physician ordered and so documented in the resident's medical record in the nursing facility.
 - (2) For days not to exceed 18 days per fiscal year while the Level I Care resident, pursuant to a physician's order, is absent from the facility on a therapeutic home visit or other therapeutic absence.
- Reimbursement for reserved beds in an Intermediate Care Facility for the Mentally Retarded, (ICF/MR), is as follows:
 - (1) For days not to exceed 15 days per occasion while the recipient is hospitalized and the following conditions are met:
 - (a) The resident intends to return to the ICF/MR.
 - (b) The hospital provides a discharge plan for the resident.
 - (c) At least 85% of all other beds in the ICF/MR certified at the recipient's designated level of care (i.e. intensive training, high personal care or medical), when computed separately, are occupied at the time of the hospital admission.

| TN No. 93-5 | FED 2 = soco | |
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| Supersedes | Approval Date FEB 2 5 1993 | Effective Date 1/1/93 |
| TN No. 86-10 | | |

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| METHOD | S OF | REIMBURS | SING 1 | FOR | RESERVED | BEI | S IN | NURSING | FACILITIES |
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- (d) Each period of hospitalization must be physician ordered and so documented in the patient's medical record in the ICF/MR.
- (2) For days not to exceed 36 days per fiscal year while the recipient, pursuant to a physician's order, is absent from the facility on a therapeutic home visit or other therapeutic absence.

HM/D4012317

TN No. 93-5
Supersedes Approval Date FEB 25 1993
Effective Date 1/1/93
TN No. 86-10